

Attachment 3

PROJECT SUMMARY

(Complete for each proposed QALICB and each project)

Qualified Active Low Income Community Business (QALICB) Information

Name of Business: (Legal name of Operating Entity, Holding Company and Assumed Business Name if applicable)

Address of Business: (Physical Address, City, State & Zip for the Operating Entity, Holding Company)

Description of Business: (Brief description of the business—who are its customers, what are its markets, where does it draw business from, what types of products and/or services are offered to whom)

Organization Structure: (C-Corp, S-Corp, Partnership, LLC)

Date Incorporated or Organized (If not organized in Oregon, date registered in Oregon)

State of Incorporation or Organized

IRS # (Federal Tax Identification Number)

NAICS Code

Business Identification Number: (Unique identification number issued by the Oregon Department of Revenue)

Company Contact (Name, Title, Email & Phone Number)

Is the business expected to be a qualified low income community business (QALICB) under the US Department of Treasury New Markets Tax Credit program?

Yes

No

Purchaser of the equity investment or long-term security:



Project Information Attachment 3

Description of Project: (Brief Narrative describing the project)

A. Complete if project is new construction or acquisition of real estate or moving to a new location.

Project address

Land area (acres or sq. feet) Building area (sq. feet)

Zoning

Construction start date

Projected completion date

B. Use of Proceeds:

Projected costs	
Land acquisition	\$
Building acquisition	\$
New construction	\$
Renovation	\$
Equipment acquisition	\$
Working capital	\$
Other (specify)	\$
Owner Equity	\$
Total uses of proceeds	\$

Anticipated impacts to communities (list both positive and negative):

Economic impacts, (list both positive and negative):



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Projected 1	number of jobs created:							
A. Projected estimated salaries:								
В.	Jobs expected to include h	ealth benefits:	Yes	No				
Projected 1	number of jobs retained:							
A.	A. Projected estimated salaries:							
В.	B. Jobs expected to include health benefits:		Yes	No				
Amount ar	nd Percent of Federal NMT	C (if applicable):					
Amount of	anticipated Oregon Low Ir	ncome Commun	nity Jobs Initiative	e Tax (Credits request	ed:		
Qualified Equity Investor (QEI)			Qualified Low Income Community Investment (QLICI)			Qualified Active Low Income Community Business (QALICB)		
Name		Name			Name			
Contact		Contact			Contact			
Γitle		Title			Title			
Phone	Email	Phone	Email		Phone	Email		
Communit	y Development Entity (CD	Е)						
Name and T	itle	Signature			Date			